PTC/SB/17 (02-07)
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For the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Complete If Known Effective on 12/08/2004. to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/582,320 TRANSMITTAL Filing Date June 9, 2006 First Named Inventor Kenneth George BRASH For FY 2007 Examiner Name Applicant claims small entity status. See 37 CFR 1.27 Art Unit Attorney Docket No. 37388-405800 TOTAL AMOUNT OF PAYMENT (\$)170.00 METHOD OF PAYMENT (check all that apply) Check | Money Order None Other (please identify): Credit Card Deposit Account Name: Seyfarth Shaw LLP Deposit Account Deposit Account Number: 19-1351 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES SEARCH FEES FILING FEES Small Entity Small Entity Small Entity** Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Application Type Fee (\$) 100 200 250 300 150 500 Utility 130 04/09/200765WASHING 00000001 1058232 50 100 100 200 Design 160 01 FC:26180 €15.00 OP 150 300 200 100 Plant 300 600 250 500 300 150 Reissue 0 0 0 0 . 100 200 **Provisional** Small Entity 2. EXCESS CLAIM FEES (\$) Fee (\$) 84/09/2237 CWASHING 0 Name/Number:10582320 100 &65 Fee Description 001(345800 DĂ#:1913550 Each claim over 20 (including Reissues) FC: 9204 200 Each independent claim over 3 (including Reissues) \$65.00 CR 180 360 Multiple dependent claims Multiple Dependent Cialms Fees Paid (\$) Extra Claims Fee (\$) **Total Claims** Fee Paid (\$) Fee (\$) - 20 or HP = HP = highest number of total claims paid for, if greater than 20 02/27/2007 DEMMANU1 00000049 10582320 Fees Paid (\$) Fee (\$)

Extra Claims Indep. Claims - 3 or HP = 130,00 GP 01 FC:1051 HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Extra Sheets **Total Sheets** (round up to a whole number) 100 = /50= Fee Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) 170.00 Other (e.g., late filing surcharge): Late filing of Declaration & Recordation of Assignment

SUBMITTED BY Telephone 312-460-5000 Registration No. 35,567 Signature (Attorney/Agent) Date February 20, 2007 Name (Print/Type) Timothy J. Keefer

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U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

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Adjustment date: 04/09/2007 CHASHING 06/19/2006 GFREY1 00600053 10502320 03 FC:2632 -250 -1025 83 FC:2632 86 FC:1296 -259.80 UP REDITH. Ker: 84/83/288/ CHRSHIND 8319-394888 RAB:131301 Name/Humser:18062328 1127.0.113 Cic . 63 9204